

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Docket Number (Optional)

BAYER-0024-A

In re Application of

Bernd Riedl et al.

Application Number

10/042,226

Filed

January 11, 2002

For ω -CARBOXYARYL SUBSTITUTED DIPHENYL UREAS AS
RAF KINASE INHIBITORS

Group Art Unit

1614

Examiner

James D. Anderson

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, January 25, 2008, rejecting the following claims: 6, 7, 9-11, 13, 15, 38, 39, 44-49, 53, 54, 66, 70, 71, 75, 76, 80, 81, and 88-121.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$ 510.00.

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:

\$ ____.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 13-3402. **I have enclosed a duplicate copy of this sheet.**

☒ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

/Richard J. Traverso/

☐ applicant/inventor.

Signature

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed.

☒ attorney or agent of record.

Richard J. Traverso, Reg. No.
30,595

☐ attorney or agent acting under 37 CFR 1.34(a).

Typed or printed name

Registration number if acting under 37 CFR 1.34(a). ____.

July 24, 2008

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of ____ forms are submitted.